

**U.S. ARMY HEALTH PROFESSIONS SCHOLARSHIP PROGRAM (HPSP)  
ACTIVE DUTY TRAINING (ADT) EVALUATION SURVEY**

This survey is used to improve training quality and administration. Complete this survey within 20 days after completing your ADT. You are not obligated to identify yourself.

1. Professional School Attended.	2. Graduation Year	3. <input type="checkbox"/> HPSP <input type="checkbox"/> ROTC <input type="checkbox"/> CIV
4. ADT Location.	5. ADT Period	6. Department/Specialty.

Check the appropriate rating category. See rating descriptions below.	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
7. Effectiveness of Student Handbook ADT information.				
8. Pre-ADT assistance by health care recruiter.				
9. Pre-ADT assistance by ADT sponsor.				
10. Evaluate the ADT application process.				
11. Timely receipt of ADT site.				
12. Staff support at ADT site.				
13. Quality of training.				
14. Future benefit of training.				
15. Frequency of performance feedback.				
16. Recommend this training to peers.				
17. Overall evaluation of training.				

1 - Needs improvement.                      2 - Acceptable.                      3 - Above Average.                      4 - Excellent.

18. Indicate your best ADT experience.
19. Indicate your worst ADT experience.
20. How would you improve the training.
21. What other types of ADT experiences should be offered?